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COVER LETTER

TO: Registration Division of C		•	
SUNSHI	NE ENTERTAINMENT & MA	RKETING SERVICES, LLC	
30BJEC1:	Name of Lin	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	AXEL GRAVELET		
		Name of Person	
		Firm/Company	
	2155 LAKE BALDWIN I	N 30-101	
		Address	
	ORLANDO, FL 32814		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
AXELGRAVELATU(CF@GMAIL.COM	321 506-8921 at ()	
Name	of Person		e Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Statute & Certificate of Statute & Certified Copy (additional copy is englessed)
Mailing Addr Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNSHINE ENTERTAINMENT AND MARKETING SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 03/08/2021 and assigned Florida document number L21000110877 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

New Registered Agent's Signature, if changing Registered Agent:

City

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
AMBR	JULIA BRUCKNER	2155 LAKE BALDWIN LN 30-101	
		ORLANDO, FL 32814	
			□ Change
			□Add
-	-	□Remove	
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N/A		
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ctive date, if other than the date of filing:	(optional)	
effective date is listed, the date must be specific and cannot be prior to date. If the date inserted in this block does not meet the applicable sment's effective date on the Department of State's applicable.	tatutory filing requirements, this date w	ursuant to 605.
ment's effective date on the Department of State's records.	· · · · · · · · · · · · · · · · · · ·	2021
		APA
ord specifies a delayed effective date, but not an effective time, at	12:01 a.m. on the earlier of: (b) The	⇒ 90th day after
filed.		-Ô
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1 4 - 6 - 2 ,,,	*,	19
- (NXEL ZHANAVIV		
Signature of a member or authorized i	representative of a member	

Filing Fee: \$25.00